2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50566

FILED Jul 20, 2006 Secretary of State

Entity Name: MONTROSE OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

P. O. BOX 2217

PACE, FL 32571 US

Current Mailing Address: New Mailing Address:

P. O. BOX 2217

PACE, FL 32571 US

FEI Number: 59-3170571 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FUNK, MICHEAL W PISCOPO, GERRY L 3497 ÉDINBURGH DR 3471 EDINBURGH DRIVE PACE, FL 32571 PACE, FL 32571

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: GERRY L. PISCOPO 07/20/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

FALL, TERRY FALL, TERRY Name: Name: 3500 EDINBURGH DR Address: 3500 EDINBURGH DR Address: City-St-Zip: PACE, FL 32571 City-St-Zip: PACE, FL 32571

Title: Title: (X) Change () Addition () Delete FUNK, MICHAEL W PISCOPO, GERRY L Name: Name:

Address: 3497 EDINGBURGH DRIVE Address: 3471 EDINGBURGH DRIVE

City-St-Zip: PACE, FL 32571 City-St-Zip: PACE, FL 32571

Title: () Delete Title: PD (X) Change () Addition NEWKIRK, KATE STEFANCIK, ROBERT Name: Name:

5211 O'KANE CIRCLE 3508 EDINBURGH DRIVE Address: Address:

City-St-Zip: PACE, FL 32571 City-St-Zip: PACE, FL 32571

() Delete Title: VΡ Title: (X) Change () Addition

GOTTSCHALK, HELAINE Name: Name: GOTTSCHALK, HELAINE 3483 EDINBURGH DR 3483 EDINBURGH DR Address: Address: City-St-Zip: PACE, FL 32571 City-St-Zip: PACE, FL 32571

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERRY L. PISCOPO Т 07/20/2006